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Public Service Commission of South Carolina 101 Executive Center Dr., Suite 100 Columbia, SC 29210



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* Required Fields	Letter of P		Print Email
Date: * 10/27/12	in Docket <u>2012</u> -	177 - WS	Language
Protestant Information:			
Name * April	Omith		
Mailing Address * 1 470 4	Castletown H	buse Drive	
City, State Zip * Tega Cay	, <u>SC</u>	B Phone *	540.421.2092
E-mail Iraphl	e revolution a	hiro. cem	
1. What is your connection or into subject of this pending proceed	erest in this case? * For examing? (This section must be comp	n ple, are you a custom oleted. Attach additional i	ner of the Company that is the information if necessary.)
Friends who	, boat a	the 10	rke and
friends who	trem		
			ach additional information if necessary.)
The lake, how bad;	5 disquist	it is ne	n't realize red to for evenyon
to enjoy	e dlean i	clean Lake	for everyon
3. Do you wish to make an appeara	nnce at a hearing in this proc	eeding , if scheduled,	and offer sworn testimony? *
No			

William Janes